

Healthcare Personnel Influenza Vaccination

Proposed Amendments to Current
Regulations

Presentation to the Public Health Council

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November 12, 2014

Background

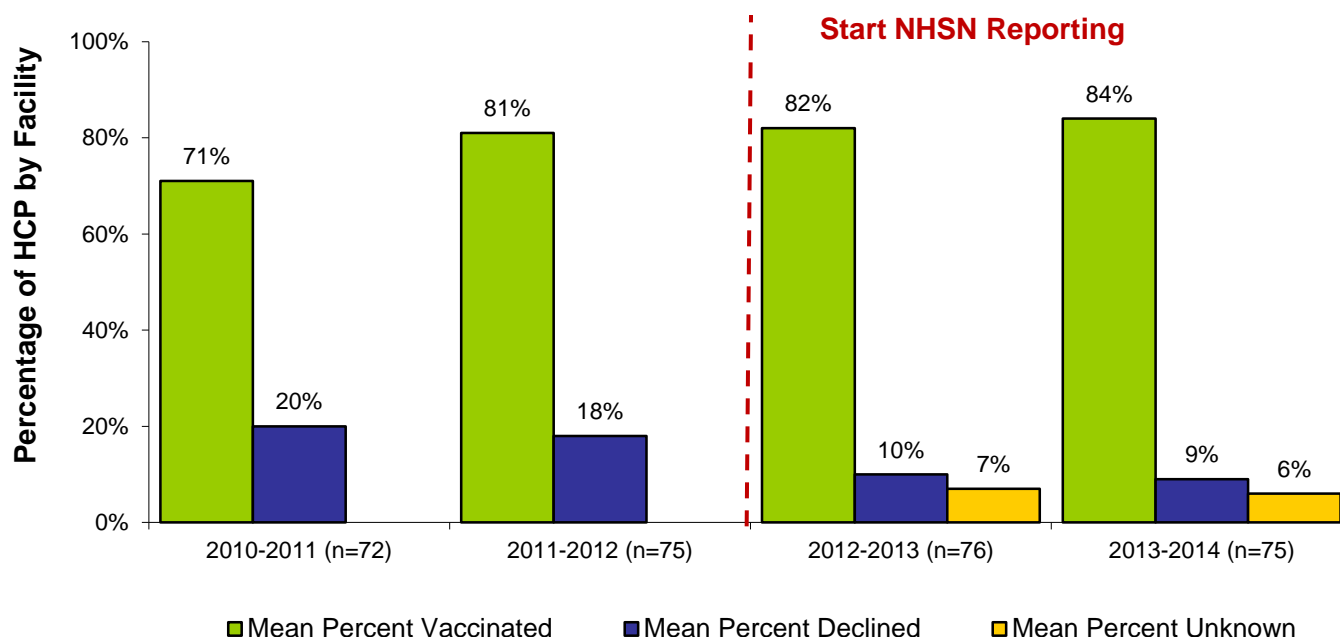
- Healthcare personnel (HCP) may be an important source of transmission of the influenza virus in healthcare settings.
- The most effective method of preventing influenza and its potentially serious complications is annual immunization.
- Vaccination of HCP protects patients and has been shown to reduce absenteeism among HCP, resulting in financial savings to healthcare facilities.
- Major public health agencies, professional societies and healthcare organizations including the Centers for Disease Control and Prevention, (CDC), Infectious Diseases Society of America (IDSA), National Foundation for Infectious Diseases (NFID), Society for Healthcare Epidemiology of America, Association for Professionals in Infection Control, American College of Physicians, American Academy of Pediatrics, Joint Commission, and the American Hospital Association recommend annual vaccination of health care workers against influenza.

History

- 2009 amendments to hospital, clinic and long term care facilities licensure regulations established requirements for all licensed healthcare facilities to ensure vaccination of all personnel except where the vaccine is medically contraindicated, against an individual's religious beliefs, or the individual declines the vaccine.
- All licensed healthcare facilities were also required to report HCP influenza rates to the Department as specified in guidelines of the Commissioner or his/her designee.
- The purpose of the amendments was to advance patient and HCP health and safety by ensuring optimal influenza vaccination coverage.
- The Centers for Medicare and Medicaid Services (CMS) mandated acute care hospitals participating in the Hospital Inpatient Quality Reporting (IQR) Program to report HCP influenza data to the CDC's National Healthcare Safety Network beginning with the 2012-2013 flu season.

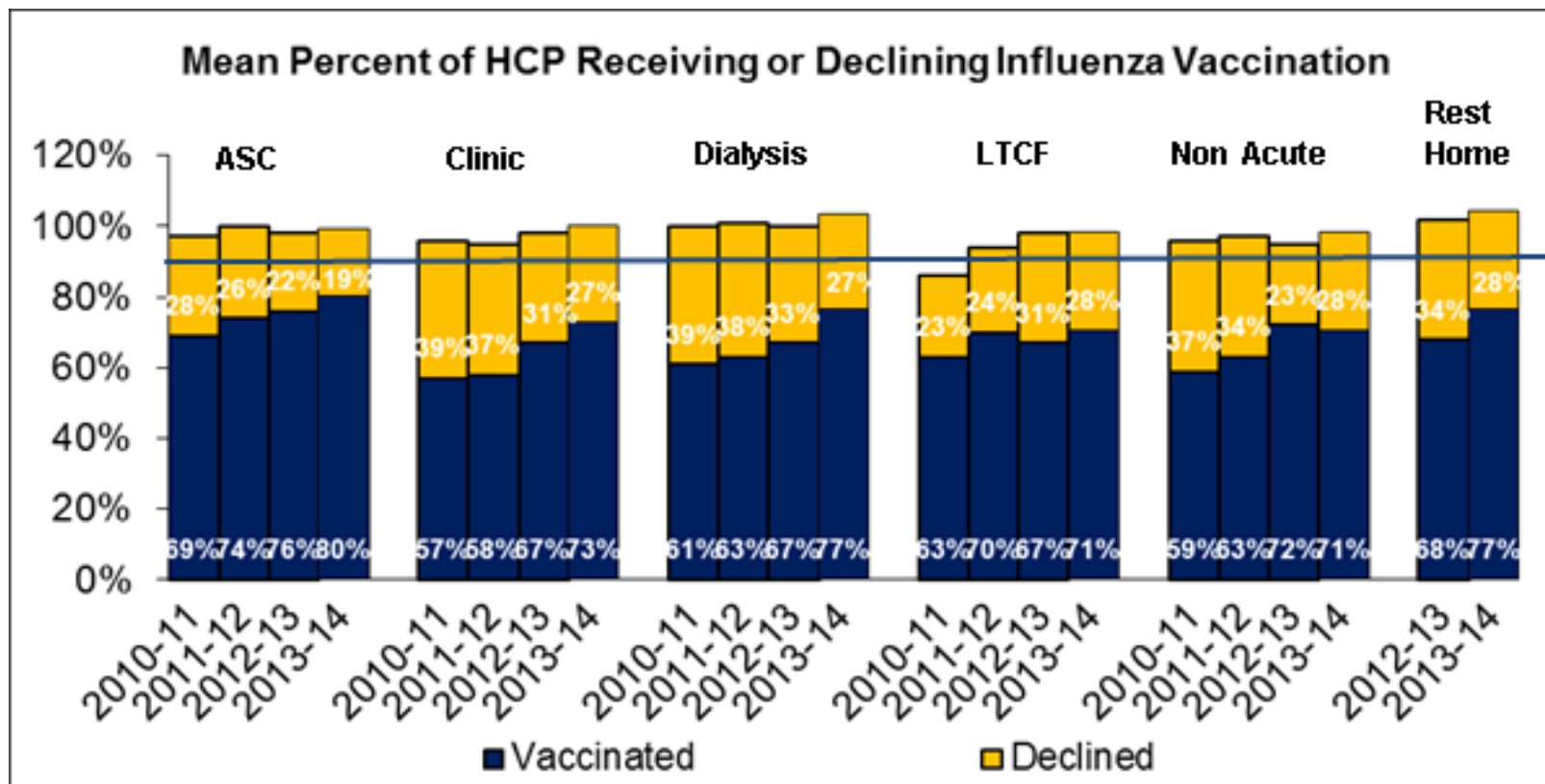
Acute Care Hospital Results

Mean HCP Vaccine Coverage, Declination, and Unknown Status at Acute Care Hospitals



Mean HCP vaccine coverage at MA ACHs was not higher than previous years and did not meet the 90% benchmark. Mean vaccine declination and unknown status was similar to 2012-13, though the denominator may have captured different employees in 2013-14.

Trends in Ambulatory Surgical Centers, Clinics, Dialysis, Long Term Care, Non-acute Hospitals and Rest Homes



* Horizontal blue line represents the 90% statewide vaccine coverage goal

Proposed Amendments

- The Department is proposing to amend the existing language to allow hospitals, long term care facilities and licensed clinics to require that healthcare personnel (HCP) receive influenza vaccination.
- The proposed amendments will apply to:
 - 130.000 Hospital Licensure
 - 140.000 Clinic Licensure
 - 150.000 Long Term Care Licensure
- HCP who decline to receive influenza vaccination may be required to wear a surgical or procedure mask while in areas where patients may be present during influenza season.
- Healthcare facilities shall supply such masks to personnel free of charge.
- DPH will continue to collect data on HCP influenza vaccination and anticipate that the department may see improvement in HCP vaccination rates in licensed healthcare facilities.

130.325: Requirement that Personnel be Vaccinated Against Influenza Virus

(A) Definitions.

(1) For purposes of 105 CMR 130.325, personnel means an individual or individuals employed by or affiliated with the hospital, whether directly, by contract with another entity, or as an independent contractor, paid or unpaid, including but not limited to employees, members of the medical staff, contract employees or staff, students, and volunteers who either work at or come to the licensed hospital site, whether or not such individual(s) provide direct patient care.

(2) For purposes of 105 CMR 130.325, the requirement for influenza vaccine or vaccination means immunization by either influenza vaccine, inactivated or live; attenuated influenza vaccine including seasonal influenza vaccine pursuant to 105 CMR 130.325(B); and/or other influenza vaccine pursuant to 105 CMR 130.325(C).

(B) Each hospital shall ensure that all personnel are vaccinated with seasonal influenza vaccine unless an individual declines vaccination in accordance with 105 CMR 130.325(F). When feasible, and consistent with any guidelines of the Commissioner of Public Health or his/her designee, each hospital shall ensure that all personnel are vaccinated with seasonal influenza vaccine no later than December 15, 2009 and annually thereafter. **Each hospital may require that any individual who declines seasonal influenza vaccination for any reason in accordance with 105 CMR 130.325(F) shall wear a surgical or procedure mask while in areas where patients may be present during influenza season, and the hospital shall supply such masks to personnel free of charge.**

130.325: Requirement that Personnel be Vaccinated Against Influenza Virus, cont'd

(C) Each hospital also shall ensure that all personnel are vaccinated against other pandemic or novel influenza virus(es) as specified in guidelines of the Commissioner or his/her designee, unless an individual declines vaccination in accordance with 105 CMR 130.325(F). Such guidelines may specify:

- (1) the categories of personnel that shall be vaccinated and the order of priority of vaccination of personnel, with priority for personnel with responsibility for direct patient care;
- (2) the influenza vaccine(s) to be administered;
- (3) the dates by which personnel must be vaccinated; and
- (4) any required reporting and data collection relating to the personnel vaccination requirement of 105 CMR 130.325(C).

(D) Each hospital shall provide all personnel with information about the risks and benefits of influenza vaccine.

(E) Each hospital shall notify all personnel of the influenza vaccination requirements of 105 CMR 130.325 and shall, at no cost to any personnel, provide or arrange for vaccination of all personnel who cannot provide proof of current immunization against influenza, as required pursuant to 105 CMR 130.325(B) and (C), unless an individual declines vaccination in accordance with 105 CMR 130.325(F).

130.325: Requirement that Personnel be Vaccinated Against Influenza Virus, cont'd

(F) **Individual Declination** Exceptions.

- (1) A hospital shall not **be required to ensure that** an individual ~~to~~ **has received** an influenza vaccine pursuant to 105 CMR 130.325(B) or (C) if:
 - (a) the vaccine is medically contraindicated, which means that administration of influenza vaccine to that individual would likely be detrimental to the individual's health.; or
 - (b) vaccination is against the individual's religious beliefs; or
 - (c) the individual declines the vaccine.
- (2) An individual who declines vaccination for any reason shall sign a statement declining vaccination ~~and~~ certifying that he or she received information about the risks and benefits of influenza vaccine, **and acknowledging that he or she understands that they may be required to wear a mask in areas where patients may be present during influenza season.**
- (3) **Nothing in 105 CMR 130.325 precludes a hospital from requiring all personnel to receive vaccination for influenza.**

130.325: Requirement that Personnel be Vaccinated Against Influenza Virus, cont'd

(G) Unavailability of Vaccine. A hospital shall not be required to provide or arrange for influenza vaccination during such times that the vaccine is unavailable for purchase, shipment, or administration by a third party, or when complying with an order of the Commissioner which restricts the use of the vaccine. A hospital shall obtain and administer influenza vaccine in accordance with 105 CMR 130.325 as soon as vaccine becomes available.

(H) Documentation.

- (1) A hospital shall require and maintain for each individual proof of current vaccination against influenza virus pursuant to 105 CMR 130.325(B) and (C) or the individual's declination statement pursuant to 105 CMR 130.325(F).
- (2) Each hospital shall maintain a central system to track the vaccination status of all personnel.
- (3) If a hospital is unable to provide or arrange for influenza vaccination for any individual, it shall document the reasons such vaccination could not be provided or arranged for.

(I) Reporting and Data Collection. Each hospital shall report information to the Department documenting the hospital's compliance with the personnel vaccination **and masking** requirements of 105 CMR 130.325, in accordance with reporting and data collection guidelines of the Commissioner or his/her designee.

Next Steps

- Outreach to key stakeholders including MHA, MCCH, MMS, and the MNA.
- Outreach to key legislators.
- December, 2014: Public Comment Hearing
- January or February 2015: Return to PHC to report on testimony and any recommended changes to proposed amendments.
- Following final action by the PHC, the Department will file amendments with the Secretary of the Commonwealth.
- Dissemination of updated regulatory requirements disseminated to all licensed healthcare facilities.